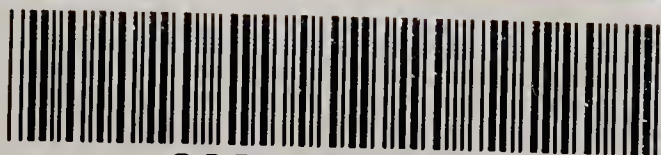




City of Calgary

HEALTH DEPARTMENT

ANNUAL REPORT FOR THE YEAR 1935



22501415705

THE CALGARY BINDERY

108 2nd Street West

PHONE — R2442

C I T Y O F C A L G A R Y
D E P A R T M E N T O F P U B L I C H E A L T H

ANNUAL REPORT FOR THE YEAR 1935

LOCAL BOARD OF HEALTH OF THE CITY OF CALGARY

His Worship Mayor Andrew Davison, Chairman, and
all Members of the City Council.

Medical Officer of Health. W.H.Hill. M.D. C.M. D.P.H.

Asst: Medical Officer of Health. Geraldine Oakley, M.D.

W.A. 28
Ann Rep.
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1935

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To His Worship Mayor Andrew Davison, Commissioner T. B. Riley,
and Members of the City Council, constituting the
Local Board of Health of the City of Calgary.

Mrs. Wilkinson, and Gentlemen:

I beg herein to submit the Annual Statement of the
work of this Department for the Year 1935.

It is sincerely hoped that in submitting this
report, the members of Council will find the time to thoroughly
peruse the content matter, and obtain as a result a clearer
conception of the very considerable work done, and the multiplicity
of activities that this Department is responsible for in whole or
in part.

It has been pointed out in previous years, that a
gross disproportion exists as between the Sanitary staffs employed
by the City of Calgary, and other cities of approximate size. A
sanitary officer is responsible for the sanitary control and super-
vision of streets, lanes, vacant lots, food and food stores, cafes
and eating places, butcher shops, ice-cream and soft drink parlors,
public halls and meeting places, barber shops and beauty parlors,
housing and housing problems, defective plumbing and gas fitting,
refuse disposal, complaints re nuisances and the satisfactory
disposal of same, the settling of disputes between individuals in
connection with sanitary matters, in a word, a continuous effort
to maintain a sweet and wholesome atmosphere in the entire City,
and we have three such officers, a Chief Sanitary Officer, and two
assistants. The two assistants cover the City, one the East and
the other the West half, and the Chief looks after the immediate
centre and supervises the work of the other two. At times and
during the wide spread of any of the communicable diseases, and in
addition to their other work, these two Sanitary Officers assist
the Quarantine Officer in the maintenance of Quarantine regulations,
and it has occurred that they have been very busy on this work
alone, resulting in the ridiculous situation of the Chief Sanitary
Officer attempting to cover the entire City himself. I may say
that the City of Edmonton has six such Sanitary Officers.

In commenting on the financial statement, it is
unfortunate, that I am unable to make any comparison as between
last year's figures and those for this year. It will be recalled
that from May 1st, 1935, amalgamation of the City's health services
took place, and the estimates of the Health Department, that is the
original estimates, were increased in that sum required to take care
of the School Medical Service for the portion of the year during
which the combined Services functioned. It would be unfair to
attempt any estimate at this time tending to show the economy of
the amalgamated service. Extraordinary expense was entailed in
its initiation, readjustments and some new arrangements were enter-
ed into as to the conduction of the new set up, and it would be
impossible in this report to show any financial advantage accruing
as the result of this co-ordination. In passing, it should be
pointed out that the total cost of Health Service as established in
the year 1935 was \$59,522.53, of which expense the City bore
\$47,405.35 and the School Board \$12,117.18, or in other words the
School Board took care of their own Medical Service for four months,

and the City Health Department assumed the cost of the combined service for the remaining eight months of the year. The estimates for the year 1936 covering the combined services show as \$57,631.80, and will of course be entirely a City responsibility. The total cost of our Health Service for the year per capita population amounted to 71.4 cents, which is a low figure having regard to the Annual Reports received from other Cities showing per capita expense ranging from \$1.30 to as high as \$2.70. The 1936 estimate is approximately \$2000 less than the sum expended during 1935. I again repeat that expenditure in the health of the people is in the category of an investment comparing it with the expenses shown as the result of preventable sickness.

VITAL STATISTICS

The population figure is still shown as 83,362, this being the figure as established by the Dominion Bureau of Statistics in the census for 1931. Western Cities have a goodly proportion of transient population, and the recent years have only tended to accentuate this. It is doubtful if computation of our present population would result in any figure of worth, owing to unsettled conditions, and it is thought well to continue with the 1931 figure as a basis to establish the different rates as embodied in this report. Throughout and in the main expression is given to the Net figures or those referring to our domestic population in which we are fundamentally interested. Gross figures are shown, and serve largely when we are concerned with comparisons of statistical data.

There were 1290 net births during the year, constituting the low figure for the last 5 years, and showing a slight decline in the Birth Rate as compared with the year 1934. The Birth Rate has declined gradually over the last few years, and at the present is low as compared with figures from the outside.

There were 635 deaths during the year, an increase of 30 over the year 1934. The net Mortality Rate per 1000 population shows at 7.6, an increased rate over last year of 0.1. This rate is the highest during the last 5 years. It will be observed as was the case last year that the deaths occurring from birth to 40 years have not been nearly so numerous as the deaths from 40 plus, the figures being 224 in the first group and 559 in the second. These latter figures are gross, including as they do non-residents, but give an idea of the difference in the two age groups. The first six causes of death as shown in the International List shows:-

Heart disease	189
Cancer	114
Diseases (Res. System)	94
" Nervous System	84
" Digestive System	59
Accidental Deaths	50

In the number of deaths from heart disease it will be observed that 124 occurred at the age of 60 years and over, this circumstance no doubt points out the influence of chronic

infection over a number of years, and reflects in no small degree the weight such infection has in the later years of life.

Cancer has occupied the attentions of Medical Science over now many years, and the observations resulting have I think lent a good deal in the way of concrete understanding. The work goes on and shows the many advances in Surgery and Radium Therapy towards what we hope will lead to the conquering of this scourge. During the year a fund was initiated known as the King George Jubilee Cancer fund. This fund was amassed by popular subscription, and I understand the response was wonderful. The fund is to provide for a continued intensive study of Cancer in its many phases, and the support of research activities having to do with the solving of this universal problem.

Respiratory diseases accounted for 94 deaths and of these Pneumonia accounted for 74. Again we find that the later years of life show the larger percentage, although a glance at the table presented also shows 15 deaths under one year of age. It has been shown that an increased incidence of Measles means an increased incidence in Pneumonia amongst very young children, and as we reached another three yearly cycle during the year, it is not to be wondered at that we experienced this number of deaths in the first year of life.

Nervous diseases, largely paralysis, took a toll of 84 lives. Diseases of the Nervous System, with resulting paralysis, have marked relationship to other conditions contracted during earlier life, and there is no doubt this influence is manifest in this group.

Diseases of the Digestive System cover such conditions as Typhoid, Appendicitis, Ulcers, and Diarrhoea and Enteritis in infancy. The latter condition has been shown to markedly increase the death rate from these diseases. Fortunately, deaths from intestinal conditions are no problem in Calgary (that is, amongst infants), and the number of deaths in this cause grouping is about usual.

Calgary shows a lessened incidence of deaths from violent causes than was shown in 1934. These deaths are preventable in total, and involve carefulness, and a strong appreciation of the safety of others. It is hoped that an obedience to the ordinary rules of safety as they apply to our many activities will eventually relegate this cause of death to the forgotten. The Infant Death Rate expressed as per 1000 live births was higher in 1935 than in any of the last five years. An analysis of the causes shows that deaths from Prematurity, Congenital debility and Malformations number 50. The total number of deaths show at 82, and the Rate at 49.5. In this connection it may be said that a good deal might be done to materially reduce the number of these deaths. The pre-natal classes do considerable in the education of the expectant mother, but the attendance is sparse, and we do not seem to reach the number we might. Education, maternal grants where necessary, adequate facilities for the care of both Mother and Baby, during the expectant period, at the time of labor, and subsequent to the birth of the Baby are all important, and should

be available to all. Care, attention, and kindly advice and guidance to the limit for the illegitimate mother. These are some of the suggestions designed to reduce the Infant Death Rate to an irreducible level.

The Maternal Death Rate per 1000 living births shows at 3.2, which is the lowest rate since 1931. It is unfortunate that Mothers die at the time of the birth of their babies, and quite the greater number need not die if only they would co-operate with those who would care for them. It is gratifying to note that during the year the four deaths that did occur would seemingly cast no reflection on their attendants. Two cases died from self-induced abortion, and the other two from unavoidable accidents attendant on the condition of pregnancy.

Vital Statistics Report in accordance with form approved by The Canadian Public Health Association, follows:-

POPULATION: As shown by 1931 Census, - 83,362.

BIRTHS

According to the records of the Division Registrar, there were during the year:

Live births	1656.	Rate per 1,000 population	19.9
Stillbirths	51.	Rate per 1,000 live births	30.8

Included in the above were 366 non-resident births and 17 non-resident stillbirths.

TABLE 1

LIVE BIRTHS, 1931-1935

Year	Population	No. Including Non-Residents	Rate Per 1,000 Population	No. Residents Only	Rate Per 1,000 Population
1935	83,362	1656	19.9	1290	15.5
1934	83,362	1617	19.4	1302	15.6
1933	83,362	1610	19.3	1295	15.5
1932	83,362	1747	20.9	1459	17.5
1931	83,362	1888	22.7	not available	

TABLE 11

STILLBIRTHS, 1931-1935.

Year	Population	No. Including Non-Residents	Rate Per 1,000 Population	No. Residents Only	Rate Per 1,000 Population
1935	83,362	51	0.61	34	0.41
1934	83,362	48	0.58	38	0.46
1933	83,362	72	0.86	66	0.79
1932	83,362	64	0.77	57	0.68
1931	83,362	73	0.88	62	0.74

DEATHS

From all causes a total of 783 deaths was registered, being a rate of 9.4 per 1,000 population, including 148 deaths of non-residents.

TABLE 111

MORTALITY RATE (Exclusive of Stillbirths), 1931-1935				
Year	No. of Deaths, Including Non-Residents	Rate Per 1,000 Population	No. Residents Only	Rate Per 1,000 Population
1935	783	9.4	635	7.6
1934	732	8.8	605	7.2
1933	697	8.4	567	6.8
1932	749	9.0	601	7.2
1931	698	8.4	586	7.0

TABLE 1V

CHIEF CAUSES OF DEATH, 1933, 1934, 1935
(Total Number Including Non-Residents)

Abridged Int. List No.	Disease	No. of Deaths			Rate Per 100,000 Population		
		1935	1934	1933	1935	1934	1933
25,33 22,24,	Diseases of heart,arteries & kidneys,including apop- lexy.	271	225	210	325.1	269.9	251.9
15	Cancer (all forms)	111	106	104	133.2	127.2	124.8
27	Pneumonia	74	45	59	88.5	54.0	70.8
42	Violent & accidental deaths	33	58	43	39.6	69.6	51.6
10, 11	Tuberculosis (all forms) ..	9	13	18	10.8	15.6	21.6
18	Diabetes	11	7	6	13.2	8.4	7.2
8	Influenza	9	8	13	10.8	9.6	15.6
1,2,3,4 5.6.7	Communicable diseases (other than tuberculosis,pneumonia and influenza)	3	2	1	3.6	2.4	1.2
	All other causes	262	268	243	314.3	322.7	291.5

INFANT MORTALITY

The infant mortality rate for the municipality,including deaths of non-residents, is presented in the following table for this year and for the preceding four years:

TABLE V.

DEATHS OF INFANTS IN FIRST YEAR OF LIFE, 1931-1935.
(Total Number Including Non-Residents)

	1935	1934	1933	1932	1931
Number of infant deaths	82	71	64	84	82
Rate per 1,000 live births	49.5	43.9	39.8	48.1	43.5

Number of deaths of non-residents included in above: 1935,18-
1934, 10 - 1933, 12 - 1932, 12. - 1931, 13.

TABLE 1

Continued

REVENUE FROM THE SALE OF LANDS IN THE DISTRICT OF COLUMBIA

For the year ending June 30, 1911

By the sale of lands owned by the Government

By the sale of lands owned by the District of Columbia

By the sale of lands owned by the United States

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CAUSES OF DEATH

In accordance with the recommended practice the causes of death are presented using the Abridged International List as follows:

ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH REVISION OF 1929.

Abridged List No.	Disease	No. of Deaths Including Non-Residents	No. Resi- dents Only
1.	Typhoid and paratyphoid fever	1	—
3.	Small-pox	—	—
4.	Measles	1	—
5.	Scarlet fever	—	—
6.	Whooping cough	1	1
7.	Diphtheria	—	—
8.	Influenza	9	7
10.	Tuberculosis of the respiratory system	6	5
11.	Other forms of tuberculosis	3	3
12.	Syphilis	3	3
14.	Other infectious and parasitic diseases	18	10
15.	Cancer and other malignant tumours	111	87
16.	Tumours, non-malignant tumours	3	2
17.	Chronic rheumatism and gout	12	9
18.	Diabetes mellitus	11	9
19.	Alcoholism (acute and chronic)	2	2
20.	Other general diseases and chronic poisonings	16	8
21.	Progressive locomotor ataxia and general paralysis of the insane	1	1
22.	Cerebral haemorrhage, cerebral embolism and thrombosis	58	49
23.	Other diseases of the nervous system and of the organs of special sense	24	20
24.	Diseases of the heart	162	148
25.	Other diseases of the circulatory system	27	24
26.	Bronchitis	2	1
27.	Pneumonias	74	62
28.	Other diseases of the respiratory system (tuberculosis excepted)	18	15
29.	Diarrhoea and enteritis	8	6
30.	Appendicitis	14	10
31.	Diseases of the liver and biliary passages	12	8
32.	Other diseases of the digestive system	25	17
33.	Nephritis	14	10
34.	Other diseases of the genito-urinary system	16	11
35.	Puerperal septicaemia	—	—
36.	Other diseases of pregnancy, childbirth and the puerperal state	5	4
37.	Diseases of the skin, bones and organs of locomotion	4	4
38.	Congenital debility and malformations, premature birth, etc.	56	46
39.	Senility	11	10
40.	Suicide	14	13
41.	Homicide	3	1
42.	Violent or accidental deaths (suicide & homicide excepted)	33	26
43.	Cause of death not specified or ill-defined	5	3
		783	635

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TABLE VI

INFANT MORTALITY BY CAUSE OF DEATH, 1931-1935
(Total Number Including Non-Residents)

CAUSE OF DEATH.	1935 Number	1934 Number	1933 Number	1932 Number	1931 Number
1. Diarrhoea and enteritis . .	4	2	6	12	8
2. Pneumonia and influenza ...	14	12	14	12	8
3. Prematurity	36	34	17	24	35
4. Congenital debility, malformations..	12	9	4	13	13
5. Injuries at birth	2	4	2	3	8
6. Acute communicable diseases (whooping cough, diphtheria, measles, Scarlet fever, etc.)	2	-	1	-	1
7. Other causes	12	10	20	20	9

Of the 82 infant deaths registered this year, 25 occurred within the first 24 hours; 18 within the first week; and 10 died being under one month of age, representing 64.6 per cent of the total number.

MATERNAL DEATHS.

The number of deaths of mothers from puerperal causes was 5, including 1 death of non-residents, the rate for the municipality is 3.1 per 1,000 living births.

TABLE VII

MATERNAL MORTALITY (Including Non-Residents), 1931-1935.

Year	Live Births	Number of Maternal Deaths	Rate Per 1,000 Living Births
1935	1656	5	3.02
1934	1617	6	3.7
1933	1610	8	4.9
1932	1747	10	5.7
1931	1888	3	1.6

Number of deaths of non-residents included in the above:
1935- 1, 1934- 4, 1933- 4, 1932- 3, 1931- 2.

The chief causes of maternal deaths during the year 1935 according to residence are presented in the following table:

TABLE VIII

CHIEF CAUSES OF MATERNAL DEATHS

CAUSE OF DEATH	Number Including Non-Residents	Residents Only
Abortions (septic & non-septic)	3	2
Puerperal toxæmias	-	-
Puerperal sepsis	-	-
Other puerperal causes	2	2

COMMUNICABLE DISEASE

Measles occupied premier place insofar as incidence was concerned, and as mentioned elsewhere in this report, due to another three yearly cycle, at which time there is always marked incidence. This is a minor communicable condition, and the 1492 cases show one death only, an infant in the first year of its life. Mumps, Chickenpox, and Whooping Cough gave the Department some considerable trouble due in the main to the non-reporting of cases. Whooping Cough accounted for one death, an Infant.

Tuberculosis accounted for 8 deaths in 1935, the lowest figure in the last five years. Tuberculosis deaths appear to be on the downward trend, as evidenced by reports emanating from other centres.

Two deaths from Typhoid Fever and one from Paratyphoid Fever were reported during the year. It is understood that these cases came from outside the City, and therefore do not reflect in any way on the City's sanitary measures. Typhoid Fever used to occupy quite a prominent place as a cause of death some years ago, but with the advancement in Sanitary Science it has become a minor factor.

The incidence of Scarlet Fever is on the up trend, and as this condition approaches the usual cycle, it looks as though we can expect an epidemic during the coming year. 166 cases have been reported, all mild, and no deaths.

Pneumonia has been reported elsewhere.

A very virulent type of Influenza appeared during the year. Eight deaths are recorded from this condition.

One case of Diphtheria was reported during the year, which case made an uneventful recovery. Calgary has reason to be very proud of the fact that beyond this one case the City has been free from Diphtheria for now going on four years.

19 cases of Infantile Paralysis occurred during the late Summer, necessitating a closing of the schools for a period of three weeks. It is felt that this prompt action saved what might otherwise have been a far more extensive outbreak. Edmonton had an experience involving considerably more cases. Three deaths occurred in the City from this condition.

Immunization against such conditions as we have immunization measures for have been conferred on those requesting same.

420 were completely immunized against Diphtheria

327 were vaccinated against smallpox.

63 were immunized against Scarlet Fever.

The work attendant on immunization is performed by the Public Health nursing staff, who also at the request of Practicing Physicians attend to prophylaxis in connection with outside cases of communicable disease.

From the following table, the part played by certain causes is at once evident:

TABLE 1X

REPORTED CASES AND DEATHS FROM COMMUNICABLE DISEASES

Disease	Age Groups							
	0-4 Years		5-14 Years		15 & over		Total	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths.
Cer. spin. meningitis	-	-	-	-	-	-	-	-
Chickenpox	24	-	178	-	6	-	208	-
Diphtheria	-	-	-	-	1	-	1	-
German measles	5	-	89	-	17	-	111	-
Influenza	-	1	-	-	-	7	-	8
Measles	224	1	1215	-	53	-	1492	1
Mumps	59	-	1005	-	116	-	1180	-
Paratyphoid fever	-	-	-	-	-	1	-	1
Pneumonia (all forms)	-	-	-	-	-	-	-	74
Poliomyelitis	7	-	9	1	3	2	19	3
Puerp. septicaemia	-	-	-	-	-	-	-	-
Scarlet fever	29	-	113	-	24	-	166	-
Septic sore throat	-	-	-	1	-	-	-	1
Smallpox	-	-	-	-	-	-	-	-
Tuberculosis (all forms)	-	-	-	1	27	8	27	9
Typhoid fever	-	-	1	-	1	-	2	-
Undulant fever	-	-	-	-	-	-	-	-
Whooping Cough	88	1	128	-	1	-	217	1

IMMUNIZATION REPORT

Diphtheria toxoid -- Quantity distributed by local health department during 1935, 773. Number receiving 3 doses in clinics or given by the department 420.

Smallpox vaccine -- Total number of capillary tubes distributed by local health department 1320. Number vaccinated by staff or clinics of the department 327.

Scarlet fever toxin -- Quantity distributed by local health department during 1935, 175. Number receiving 5 doses in clinics or given by the department 63.

TABLE X.

REPORTED CASES AND DEATHS FROM TUBERCULOSIS, 1931-1935.

Year	Cases	Number of Deaths in City	Number of Deaths in Outside Sanatoria.	Total Deaths	Rate Per 100,000 Population.
1935	27	8	6	14	16.8
1934	38	10	11	21	25.2
1933	30	18	7	25	30.0
1932	8	23	8	31	37.2
1931	38	21	11	32	38.4

TABLE XI.

REPORTED CASES AND DEATHS FROM SCARLET FEVER, DIPHTHERIA, WHOOPING COUGH AND MEASLES, 1933-1935.

(Total Number Including Non-Residents)

Disease	Cases			Deaths			Mort. Rate Per 100,000 population		
	1935	1934	1933	1935	1934	1933	1935	1934	1933
Scarlet fever	166	93	36	-	-	-	-	-	-
Diphtheria	1	-	-	-	-	-	-	-	-
Whooping Cough	217	166	238	1	-	1	1.2	-	1.2
Measles	1492	14	47	1	-	-	1.2	-	-

Non-residents: Included in the above for 1935 were nil deaths from scarlet fever; nil deaths from diphtheria; nil deaths from whooping cough; one death from measles.

TABLE XII

REPORTED CASES AND DEATHS FROM TYPHOID FEVER, 1931-1935.

(Total Number Including Non-Residents)

Year	Cases	Deaths.	
		No.	Rate Per 100,000.
1935	2	1	1.2
1934	3	2	2.4
1933	4	-	-
1932	5	2	2.4
1931	-	-	-

No. of deaths of non-residents included in above: 1935-1, 1934-1, 1933-0, 1932-1, 1931-0.

ANNOUNCEMENT

Respectfully request that you please do not use the information contained in this document for any purpose other than that for which it was intended. The information contained herein is confidential and its disclosure to unauthorized persons is strictly prohibited.

Any person who is found to have disclosed this information to unauthorized persons will be subject to disciplinary action, including but not limited to, suspension or termination of employment.

Thank you for your cooperation in maintaining the confidentiality of this information.

TABLE 1

Summary of Data for the Year Ending 1999

Year	Q1	Q2	Q3	Q4	Total
1997	10	12	15	18	55
1998	15	18	20	22	75
1999	20	25	28	30	103
2000	25	30	35	38	128
2001	30	35	40	45	150

TABLE 2

Detailed Data for the Year Ending 1999

Category	Sub-Category	Value	Percentage
Category A	Sub-A1	10	18.2%
	Sub-A2	12	21.8%
	Sub-A3	15	27.3%
	Sub-A4	18	32.7%
Category B	Sub-B1	15	19.7%
	Sub-B2	18	23.2%
	Sub-B3	20	25.6%
	Sub-B4	22	28.5%

The data presented in the tables above is for informational purposes only and should not be used for any other purpose. The data is subject to change without notice.

TABLE 3

Summary of Data for the Year Ending 2000

Year	Q1	Q2	Q3	Q4	Total
2000	30	35	40	45	150
2001	35	40	45	50	170
2002	40	45	50	55	190
2003	45	50	55	60	210

This document is confidential and its disclosure to unauthorized persons is strictly prohibited.

QUARANTINE AND DISINFECTION.

The duties in connection with this work have taxed the energies of the Department during practically the whole year. The quarantine Officer early found that he could not attempt to keep pace with the requirements of communicable disease regulations, with the result that for an appreciable part of the year the entire staff had to assist in the performance of Quarantine duty. It is felt that at times when communicable disease is wide spread our deplorable lack of staff involves considerable upon this Officer. He commences early and works late. Saturday and Sunday mean nothing to him, he gets no time off, and has to hold himself in readiness during the evening or at any other time to answer report of communicable disease. He owns his own car and the amount of driving allowance he receives does not commence to cover the mileage travelled. As a matter of fact he actually has to meet the deficit entailed in the service of the City from his own pocket. It is hoped that something can be done in the way of adjustment of this Officer's problems.

The number of houses quarantined during the year	- 3,113.
Number of releases	- 3,461.
Patients removed to the Hospital	- 178.

SANITATION.

There is nothing seasonal about this branch of City Health activities. Sanitary supervision is everlasting and covers, as mentioned at the first of this report, a good deal of ground. In addition to what is usually understood by sanitary duties, which duties have been excellently discharged throughout the year, the Inspectors have been most active in Housing problems which have presented frequently. The housing situation is most acute, and a good deal of overcrowding obtains. On occasion it has been found possible to stress improvement, but in quite the majority of instances laws and by-laws are grossly violated, and for the want of suggesting something better we have perforce to let the problem remain as it is. A good deal of correspondence has passed as between Council and this Department in reference to this matter, and it is hoped that it will not be long until some change for better times results in marked improvement of the whole condition. As the direct result of representations made by this Department, active Venereal disease cases taking their meals at the Provincial Kitchen have been removed to quarters where segregation has taken place; this also applies to men suffering from communicable skin conditions.

Considerations as to the sanitary state of the feed lots at Bonnybrook occupied some considerable time in their adjustment, and a goodly amount of correspondence passed between this Department and in turn the City Commissioners and the Provincial Government; this in addition to many visits by the Chief Sanitary Officer to the District. It is now established, it is hoped, that the improvements suggested last year having been carried out, we may pray for the dawn of amicable relations between the disputing parties concerned.

This Department lent the utmost in co-operation with other Departments having to do indirectly with sanitary matters, particularly the Police and the Relief Departments. This unstinted co-operation between City Branches is most desirable, and bids for a fuller understanding of Municipal problems.

The production, preparation, distribution and handling of food stuffs have been rigidly supervised, and sanitary regulations stressed and enforced.

In 1934 the Legislative Assembly issued regulations governing bakeries, and we have to report that structural improvements and requirements have in the main been attended to, and a very satisfactory situation obtains.

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
Inspections	786	775	798	780	875	392	378	658	581	860	756	762	8401
Notices issued-written	17	13	21	14	14	12	8	11	14	18	27	14	183
Notices issued, Verbal	151	156	165	147	104	90	108	138	99	169	161	44	1532
Complaints Received	29	28	35	42	74	39	45	34	35	23	26	17	427
Complaints Justified	27	25	32	37	64	35	34	28	24	19	23	11	359
Prosecutions	1	-	-	-	-	-	-	-	1	-	-	-	2
Quarantines	143	115	246	457	1062	521	123	78	68	65	87	148	3113
Releases	184	181	202	367	926	689	291	143	124	144	107	103	3461
Patients Moved	13	8	11	6	18	10	5	4	20	16	34	33	178

MEAT INSPECTION

At the present time, the City Inspector exercises supervision over one Abattoir only. This Abattoir does custom slaughtering for a number of butchers and farmers. The new meat by-law provides that no carcass of an animal intended as food for man be admitted to the City Market unless such carcass has previously been approved by a Federal Meat Inspector or some other competent and responsible authority. This, with the exception of veal, which veal must be presented at the Meat Inspection Room for inspection by the City Meat Inspector, before being disposed of for sale and subsequent human consumption. This ruling is a vast improvement over the old by-law.

Meat inspection has been very satisfactory during the year, and the Department has had no occasion to attend to anything in the way of complaint.

At the latter end of the year Council ruled that a slaughtering fee should be charged at the abattoir to take care of the necessary Inspection fee, this in view of the fact that the new by-law calls for the appointment of a qualified Veterinary Officer to undertake this inspection (our present Inspector is a practical man only). The new year will no doubt see the initiation of this fee, and the appointment of the aforementioned meat Inspector.

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The following information is provided for your information. It is not a legal document and should not be used for legal purposes. The original document is the only authoritative source of information.

In 1998, the United States government issued a report on the state of the world. The report was titled "The State of the World 1998" and was published by the United States Department of State.

The report was a comprehensive overview of the world's state in 1998. It covered a wide range of topics, including human rights, the environment, and international relations. The report was a valuable resource for anyone interested in the state of the world in 1998.

At the time of the report, the world was in a state of flux. There were many challenges facing the world, including the end of the Cold War and the rise of new superpowers. The report provided a detailed analysis of these challenges and offered suggestions for how to address them.

The report was a landmark document in the history of international relations. It provided a comprehensive overview of the world's state in 1998 and offered valuable insights into the challenges facing the world at that time.

As the world has changed, the report remains a valuable resource. It provides a historical perspective on the world's state in 1998 and offers insights into the challenges facing the world today.

The following table shows the work under this heading for the year 1935:

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
SUBMITTED													
Beef	333	205	261	259	291	168	204	174	280	366	321	261	3123
Veal	230	207	254	231	206	240	200	248	184	214	302	254	2770
Hogs	126	77	88	87	61	30	47	32	27	28	42	49	694
Sheep & Lamb	13	21	15	17	8	82	79	56	87	78	58	46	560
CONDEMNED													
Beef	5 $\frac{1}{4}$	3	3	5	2	1 $\frac{1}{2}$	4	1	1	2	3	2	32 $\frac{3}{4}$
Veal	1	1	1 $\frac{1}{2}$	2	2	1	-	1	-	1	2	1	13 $\frac{1}{2}$
Hogs	4	5	5 $\frac{1}{2}$	5	5 $\frac{1}{2}$	6	6	4	4	4	5	4	58
Sheep & Lamb	1	1	1	1	-	-	1	1	1	1	1	1	10
PORTIONS													
CONDEMNED:													
Beef Heads & Tongues	11	6	7	11	6	8	3	4	6	5	5	7	79
Hog Heads	33	21	7	15	23	7	14	12	9	14	14	14	183
Beef Livers	62	31	57	-	33	25	41	26	23	37	42	42	419
Veal Livers	14	6	-	8	-	20	4	7	2	9	-	-	70
Hog Livers	41	37	42	40	31	15	23	14	13	15	17	29	317
Sheep Livers	7	17	12	10	6	43	21	22	29	41	41	31	280
Beef Hearts	6	-	-	10	9	6	3	7	-	6	16	6	69
Veal Hearts	-	-	-	3	-	-	-	-	-	-	-	-	3
Turkeys	4	-	-	-	-	-	-	-	-	-	-	9	13
Hog Hearts	-	-	-	15	-	-	-	-	-	-	-	4	19
Beef Carcasses rejected	-	-	9	-	-	-	-	-	-	-	-	6	15
Hog Carcasses rejected	-	-	-	-	-	-	-	-	-	-	-	4	4
Sheep Carcasses rejected	-	-	-	-	-	-	-	-	-	-	-	2	2

MILK INSPECTION

This particular Division has to do with the Sanitary control of milk production, processing, handling, and distribution. Two Inspectors are assigned to this work, the one to supervise Dairy activities as they relate to the farm, that is sanitation with respect to barns, milk houses etc., and the cleanly handling and care of raw milk until shipped to the City. This Inspector has considerable distances to travel in the discharge of his duties. The other Inspector exercises sanitary control of Milk plants, and the distribution of milk to the consumer; he also obtains a continuing run of samples for testing at the City Laboratory. During the year, and in view of the marked incidence of communicable disease, it has been necessary to assign both officers to quarantine duty in times, with the result that the outside dairy inspection has not been as frequent as it should have been. Another factor contributing to this was the lack of the necessary car. This was provided for in the estimates at the first of the year, and we did not receive the new machine until October.

Six licenses were suspended during the year for varying periods for infractions of the City Milk By-law.

[illegible]

Of the 269 vendors permits issued, 242 are for stores and 27 for house to house distributors.

Of the 366 dairymen permitted to ship into Calgary, 234 ship milk and 132 ship table cream or cream for the manufacture of ice cream.

Total sediment tests of milk shipped by producers	3130.	
	2764 or 88.3%	graded GOOD.
	215 or 6.9%	FAIR.
	151 or 4.8%	BAD

Total sediment tests of milk sold by retailers	330.	
	327 or 99.1%	graded GOOD
	3 or 0.9%	BAD

Total reductase tests from retailers (pasteurized)		
	77 or 100%	grade No. 1.
(raw)		
	340 or 99.4%	grade No. 1.
	2 or 0.6%	grade No. 2.

Total reductase tests of shippers to distributors	3029.	
	2838 or 93.7%	grade No. 1
	185 or 6.1%	grade No. 2.
	6 or 0.2%	grade No. 3.

Approximate per capita daily consumption of milk	.53 pints.
" per capita daily consumption of cream	.03 pints.

CHILD WELFARE

During the year amalgamation of the City and School Medical Services took place, and the combined service has been functioning for now eight months. Dr. Oakley who had been in charge of the School Medical Service, assumed the role of Assistant Medical Officer of Health and has complete control of the Child Welfare Branch which incorporates the service she previously supervised. It is to be remarked that a splendid spirit of co-operation obtains in the amalgamated unit, and most interesting to observe the manner in which child welfare activities are dove-tailing into the general scheme of things.

The reports of Dr. Oakley and Nurse Lavell follow:

TOTAL EXAMINATIONS OF SCHOOL CHILDREN MADE BY TWO EXAMINING
PHYSICIANS (one on part-time).

	<u>Re-exams.</u>	<u>Beginners</u>	<u>Totals</u>
Physical examinations made	5964	1194	7158
Special cases	1666		1666
Not vaccinated	3588	966	4554
Malnutrition	182	21	203
10% or more below normal weight	871	169	1040
7-10% below normal weight	632	149	781
Enlarged glands	198	75	273
Enlarged Thyroid	67	1	68
Anaemia	67	14	81
Cardiac disturbance	69	10	79
Nervous disorders	16	11	27
Pulmonary disturbance:			
General	4	0	4
Suspected T.B.	4	0	4
Bronchitis	7	3	10
Asthma	7	1	8
Skin diseases:			
Ringworm	7	0	7
Scabies	35	3	38
Impetigo	3	0	3
Miscellaneous	49	2	51
Psoriasis	1	0	1
Digestive disturbance	14	5	19
Defective vision	868	50	918
Other eye defects	18	0	18
Defective hearing	99	26	125
Enuresis	0	3	3
Defective extremities	27	7	34
Defective spine & posture	13	2	15
Defective chest	3	0	3
Defective nasal breathing	256	104	360
Enlarged adenoids & tonsils	313	81	394
Mod. " " "	595	191	786
Psychological abnormalities	15	5	20
Unclassified medical defects:			
Obesity	13	0	13
Diabetes	4	0	4

Unclassified medical defects (continued)

	<u>Re-exams.</u>	<u>Beginners</u>	<u>Totals.</u>
Tonsillitis	2	0	2
Epilepsy	1	0	1
Rheumatism	3	0	3
Worms	3	0	3
Menstrual disorders	1	0	1
Pyelitis	2	1	3
Unclassified	10	0	10
Unclassified surgical defects:			
Hernia	1	4	5
Appendix	3	0	3
Fracture	1	0	1
Phimosis	7	4	11
Torticollis	2	0	2
Minor Surgery	10	0	10
Unclassified	10	0	10
Received Toxoid	737	226	963
Number O.K.	2578	505	3083
Parents invited	181	1229	1410
Parents present	169	1040	1209

The number of complete physical examinations, 7158, is lower than in previous years as the schools were closed in September because of the outbreak of Infantile Paralysis. Fortunately, the number of cases which developed was not large, 15 in all.

The freedom from Smallpox which Calgary has enjoyed for many years has made the public indifferent to vaccination, and there is a general laxity on the part of parents towards having their children given this protective treatment. In the 1935 report it will be noted that 63.6% of our city children have never been vaccinated.

A similar indifference is manifested toward the toxoid inoculation for the prevention of diphtheria. This too, I feel is largely due to Calgary's good fortune in having had only one case of diphtheria in five years. A child's safety from an infectious disease must, however, be founded on immunity toward the disease in question and not mere chance. Diphtheria is frequently fatal to young children and parents should consider it a duty to have their children given this inoculation at six months of age.

1040 or 14.5% of the children examined were found to be 10% or more below average weight for their age and height. These figures show a slight improvement over last year. Another 781 or 10.9% were between 7 and 10% below average weight. This department is working hard to secure adequate rest and food for these children. Crowded tenements and unemployment doles make the problem very difficult. $\frac{1}{2}$ a pint of milk a day is supplied free to poorly nourished children. Approximately 400 bottles a day are distributed.

68 children or 0.95% had some enlargement of the thyroid gland. There were no cases of marked goitre in children of school age. Iodine tablets supplied free by the Provincial Government are given to most of these cases.

12.8% of the children examined required glasses or a change of glasses. Eighteen of the worst cases of defective vision are in the sight-saving class and another ten have vision so bad as to require front seats in the classroom. Free glasses were supplied to 159 children.

125 or 1.7% had defective hearing. We have a list of 11 names of children so deaf as to make lip-reading advisable. A special class for these cases is a real need. They have all secured medical treatment and but little further improvement can be looked for.

79 or 1.1% have an organic heart condition. This percentage is slightly lower than the percentage which has been found for several years past. Most of the heart lesions have followed tonsillitis, chorea or rheumatism. A few have followed influenza.

394 or 5.5% had enlarged or diseased tonsils, making their removal advisable. We referred a total of 763 cases of abnormal tonsils to the family physician but some of these were not urgent. Members of the Calgary Medical Association operated free of charge on a number of these cases for whom treatment could not have been secured otherwise.

16 children were referred to the T. B. Clinic for a chest examination. Several of these are being kept under observation but no active cases were found.

There were but 7 cases of ringworm, only one of which affected the scalp.

3083 or 43.1% of the children examined were found to be quite O.K.

1209 or 85.7% of the parents attended the first physical examination of their child.

<u>Cases referred to family physician throughout year.</u>		<u>Cases treated by family physician throughout year.</u>
Malnutrition	34	10
Anaemia	18	6
Behaviour problems	9	7
Enlarged Thyroid	26	1
Nervous disorders	10	5
Cardiac	2	
Ringworm	4	1
Impetigo	-	2
Scabies	14	5
Miscellaneous	12	8
Suspected T.B.	4	1
Defective vision	521	250
Other eye defects	17	8
Digestive disturbance	6	1
Asthma	4	
Defective Hearing	37	13

<u>Cases referred to family physician throughout year. (cont)</u>	<u>Cases treated by family physician throughout year. (Cont)</u>	
Defective nasal breathing	21	4
Abnormal adenoids & tonsils	763	229
Pulmonary disturbance	-	3
Enlarged glands	1	-
Defective extremities	1	-
Unclassified medical defects:		
Obesity	8	-
Pyelitis	2	2
Rheumatism	3	2
Worms	-	2
Goitre	-	4
Menstrual disorders	4	1
Diabetes	2	-
Tonsillitis	2	-
Scoliosis	1	-
Unclassified	12	10
Unclassified surgical defects:		
Appendicitis	2	3
Hernia	7	3
Fracture	1	1
Minor surgery	11	12
Phimosis	12	2
Defective spine & posture	1	-
Torticollis	1	-
Unclassified	5	3
Totals	<u>1578</u>	<u>599</u>

REPORT OF DISTRICT NURSES (9 nurses)

Re-admissions	19	Malnutrition	814
Health Talks	902	Nervous disorders	9
No. in class inspections	98,071	Pulmonary disease	3
Special inspections	27,900	Whooping Cough	30
Referred to Medical Insp.	1,171	Scarlet Fever	36
Phones and Notes	4,261	Chickenpox	60
Treatments	2,380	Conjunctivitis	59
Exclusions	278	Tonsillitis	19
Pediculosis	26	Scabies	71
Eye defects	887	Ringworm	7
Ear defects	107	Impetigo	16
Defective nasal breathing	152	Eczema	21
Tonsils and adenoids	624	Measles	369
Enlarged glands	219	Mumps	452
Orthopaedic defects	41	Home Visits	4377
		Pre-School visits	253

REPORT OF DENTAL CLINIC

It will be noted that 14,738 pupils were inspected by the school dentist. All pupils in the public school were examined once and most of the lower grades, from 1 to 4 inclusive, were examined twice. The number with perfect teeth at the time of inspection was 4275 or 29.0%.

A total of 8149 cases were cared for at the clinic through-

out the year. 369 extractions of permanent teeth and 2476 extractions of primary teeth were performed. A total of 9169 fillings were inserted.

Treatments:

Silver Nitrate Reduction	2575
Opened Pulp	308
Lanced Abscess	5

Extractions:

Permanent	369
Deciduous	2476
Gas Anaesthetic	4

Fillings: Various 9169

No treatment 296
Refused treatment 106

Prophylaxis 183
Frenum Cauterization 7
Miscellaneous operations 231
Total Operations 14,882
Completed Cases 6743

Total Number of Teeth Treated:

Permanent	7344	
Deciduous	<u>4475</u>	11,819

New Patients 1245
New Cases Current Year 3888
Re-appointments 2538
Emergency cases 499
Total Number Patients Treated 8149

Number Inspected 14,738
Number needing treatment 7947
Need nothing at date of inspection 2487
Number O.K. 4275

Defective Teeth:

Permanent	11,038
Deciduous	4,461.

REPORT OF INFANT & PRE-SCHOOL CLINIC

Clinic Space	Up to September, Clinics were held as before in rooms on the fourth floor of the Police Building; then they were moved, with the Health Department, to the top floor of the City Hall. There is one large dressing and weighing room, two smaller office rooms, a lavatory and small waiting room.								
Staff	One Doctor (Pediatrician). Two Public Health Nurses. (One supplied by the Provincial Department of Health, the other by the City of Calgary). A nurse-in-training from either the General Hospital or the Holy Cross Hospital comes two days a week for instruction and practical training. Late in December a part time clerk was added.								
Amalgamation	In May, the School Health Services were amalgamated with those of the City.								
Routine of Work	1. Cards made out at birth registration to follow through school age. 2. Invitations to Infant Clinic sent to mothers. 3. Questionnaire sent to family physicians concerning birth and home conditions. 4. Where home conditions considered inadequate by family physicians, families are visited by school nurses in that district and advised of Infant Clinic. 5. At six months notices sent re advisability of Diphtheria Toxoid. 6. At one year, further questionnaire sent to family physician. 7. After three years a special appointment made for every child to be given a complete physical examination.								
Time of Clinics.	1. One afternoon for examination of Pre-schools by school doctor. 2. Two afternoons for Infants and Pre-schools with clinic doctor in attendance. 3. Two afternoons with nurses in attendance.								
Other Services.	1. Two rooms loaned to Mental Hygiene Clinic every second week. 2. One room loaned to Victorian Order of Nurses one afternoon a week for Pre-Natal Classes.								
Attendance at Clinic.	Total Attendance during year:- <table><tr><td>Infants</td><td>4708</td></tr><tr><td>Pre-School</td><td>2099</td></tr><tr><td>Total</td><td><u>6807</u></td></tr></table> No. of individual cases 2467 No. of new cases during year 777 Also single examinations by School Doctors 159			Infants	4708	Pre-School	2099	Total	<u>6807</u>
Infants	4708								
Pre-School	2099								
Total	<u>6807</u>								

No. of interviews with Clinic Doctor:-

Infants	2136
Pre-School	<u>735</u>
Total	<u>2871</u>

No. of interviews with Clinic Nurses:-

Infants	2572
Pre-School	<u>1364</u>
Total	<u>3936</u>

No. of Clinics held during year 111

Highest attendance	123
Lowest "	7
Average "	61

Attendance was lower than that of preceding year due to:-

- An epidemic of measles and mumps in May and June.
- Clinic closed most of September because of Poliomyelitis.
- Moving of Clinic rooms.

Visits.

To homes by Clinic Nurses:-	2451
" " " School "	77
Birth registration visits	
by School Nurses	450
No. of visits not found	<u>415</u>
Total	<u>3393</u>

Feeding Cases

Breast	912
Bottle	1718
Mixed	452
Other	1626

Defects Found

	<u>Infants</u>	<u>Pre-School</u>
Hernia	16	6
Phimosis	10	16
Congenital Malformation	7	
Eyes	19	29
Ears	21	20
Eczema	26	17
Impetigo	7	8
Mental Deficiency	2	1
Furunculosis	1	1
Malnutrition	8	14
Rickets	4	3
Tonsils	15	175
Adenoids	6	75
Diarrhoea	39	
Anaemia	5	1
Glands	4	23
Mouth	5	7
Throat	3	10
Intertrigo	2	
Scabies		5
Nose		15
Other Conditions	61	73

No. cases referred to Family Physician:-

Infants	18
Pre-School	<u>26</u>
Total	<u><u>44</u></u>

Infectious disease found at Clinic:-

Chicken Pox	3
Whooping Cough	6

No. of deaths:-

Infants	8
Pre-School	<u>1</u>
Total	<u><u>9</u></u>

Immunization	No. having Diphtheria Toxoids completed	283
"	" Smallpox Vaccinations "	112
"	" Scarlet Fever "	37
(These have been done in Health Department or by private Physician)		

Dental Clinic	No. cases treated	314
	" appointments not kept	49
	Extraction under anaesthetic at home	1
	No. cases treated by School Dentists	32
	No. appointments not kept	14
	Total	<u><u>347</u></u>

Eye, Ear, Nose, Throat Clinic.	Operations:-	
	Tonsils & Adenoids	76
	Adenoids only	2
	Removal part of Uvula	1
	Throat examination under anaesthetic	<u>1</u>
	Total	<u><u>80</u></u>

Of these:-

59 were done free of charge after investigation.

10 paid hospital fee only.

11 paid full fee of \$10.00

\$60.00 was collected for Clinic fee.

\$ 5.00 was refunded.

Treatments:-

Eye	452
Ear	230
Nose & throat	159

Of these 156 were new cases

Refractions & prescriptions for glasses	8
Home visit made by Doctor	1

Pre-Natal	Letters sent from Clinic	10
	Weekly classes by V.O.N.	

Pre-School Clinic (Con't)

3-4 year	Since October:	
special	No. examined by School Doctors	159
examinations	No. Appointments not kept	148
	No. examined by Clinic Doctor	131
(These figures included in above report)		

Donations We gratefully acknowledge the following donations:

3 gals. Cod Liver Oil from Good Cheer Club.
 Cod Liver Oil & Infant foods from Mead, Johnson & Co.
 Drugs (samples) from offices of Dr's. McEachern,
 Merritt, et al.

Milk from Hospital Aid.
 Layettes from North Hill Club.
 Clothes from private individuals.
 Literature from the Metropolitan Life Insurance Co.

CALGARY TUBERCULOSIS SOCIETY

Again I have to remark that it is unfortunate that this presently indirect branch of City Health work is not under the complete control of this Department. As a matter of fact the Department does control approximately 75% of the activities, and might as well assume the entire responsibility. This Society has served the City for in the neighbourhood of 25 years and have done a splendid work, and during the year representations were made to the Department to have if possible the City assume in its entirety the work of the Society. This would mean that the City would take over the present Nurse (Miss Acton) and provide her with transportation. Such an undertaking would, I think, be most advantageous for the City, and I would be very glad of an opportunity to discuss ways and means of affecting complete control of this important Health Branch. The report of the Society follows:

Herewith is the report of the activities of the Calgary Tuberculosis Association for the year 1935.

The weekly chest clinic was held regularly, and shows a total of 42 clinics held. The loss of 10 clinics is explained by the fact of my summer holidays, examiners from the Central Alberta Sanatorium were unable to come in on two occasions, and also Christmas day and New Years' day fell on Wednesday. The clinics held, however, did accomplish valuable results in preventive work, by examination of contact cases and arrangements for institutional treatment for positive cases. With this established clinic we are able to keep in closer touch with patients who are discharged from the Sanatorium. In this way we have a knowledge of conditions in the home and in many instances we can correct defects in living and diet so that break-downs are prevented.

Visits to homes were carried out during the year, a total of 1431 calls being made, and the information gathered on these visits was acted upon, and is included in the attached report:

Report of Tuberculosis Society (con't)

Clinics held	42
Patients attending	232
" examined	223
New patients examined	127
" T. B. cases	17
Ex. C. A. S. cases examined	26
Contacts	81
Suspects found	20
Examinations incomplete	8
HOME VISITS	1431

EDUCATIONAL

The interchange of correspondence and statistical matter continues between the City and Centres elsewhere, and the information received is not only valuable but very helpful. It is felt that this not only aids in our own problems, but what is more, brings about a sympathetic understanding of the problems of others.

Both Dr. Oakley and the Medical Health Officer have given a number of talks throughout the year on matters pertaining to Public Health and Preventive Medicine. It is hoped that a continuence of these requests will permit time to carry on this educational programme. The course of Lectures in Public Health were given in accordance with the demands of the University of Alberta, at both Hospitals by the Medical Health Officer to the student nurses.

The Public Health Nurses of the School Division continue to give instructional health talks to school groups. It is felt that these talks are of inestimable value to the growing child, and it is gratifying to note the enthusiastic reception given them. A great deal of literature having to do with matters pertaining to general health, communicable disease and such like, has been distributed throughout the year.

CONCLUSION

In concluding it might be here stated, that in addition to the general supervision of the entire Department, the Medical Health Officer has conducted some 2400 examinations, investigations and placements for the Relief Department. This seeming duty involves much in time and oftentimes patience, and it is hoped that the manner in which this work is done is reflected in an appreciation of the extension of fairness by the City to its relief recipients.

The Department wishes to express its most sincere thanks to His Worship the Mayor, the Commissioner, and the Members of the City Council for their help, support, and timely advice throughout the year. To the sub-committee of the Council and the

Calgary School Board for their painstaking effort in bringing about the Amalgamated Health Services. To Dr. W. H. Park, City of New York Health Department, for his valuable advice during the epidemic of Poliomyelitis. To The Metropolitan Life Insurance Co. for the furnishing of literature and the help their organization has always been. To The Provincial Department of Health and the Health Department of the City of Edmonton for their many courtesies. To The Calgary Tuberculosis Society for their work in Tuberculosis Control, and to the V.O.N. for the continued conduction of the Pre-natal Clinic, both valuable additions to our Health Work. To the Central Alberta Sanatorium Medical Staff for providing Specialist's attention at the weekly Chest Clinic, and their unstinted help at all times. To The Calgary Medical Society for their co-operation and advice, and to a number of Pharmaceutical Firms for continued provision of courtesy supplies of much value in our Child Welfare Clinics, their names appear in the report attaching to the Child Welfare Division.

The Medical Officer of Health wishes to take this opportunity to once again offer his heartfelt thanks individually to the men and women so intimately associated with him as the Staff of Health Department. Whilst not in the main appreciated, Health work and its many ramifications are onerous and profoundly responsible duties, calling for snap-judgment and no mistakes, intensive, exacting, and continuous, and it is not too much to say that the Staff's ever present devotion to duty, absolute co-operation, cheerfulness, and unswerving loyalty, have been a source of much comfort to him, and of inestimable value in bringing to a close a busy, and not unsuccessful year.

Respectfully submitted,

W. H. HILL, M.D. C.M. D.P.H.

Medical Officer of Health.

WHH/H

FINANCIAL STATEMENT

	1935	1934
Salaries	15,115.84	14,921.53
Serums, Antitoxins, etc.	253.85	97.24
Disinfectants	138.94	44.30
Laboratory Charges (to City Lab:)	1,200.00	1,200.00
Auto Maintenance (2 City 5 Allowances)	2,001.76	2,368.79
Sundries	319.78	270.38
Stationery & Printing	229.86	243.13
Postage	145.00	119.72
Street Railway Tickets	150.00	150.00
Isolation Ambulance Hire	276.00	168.50
Milk Inspection Expenses	108.74	115.43
Meat Inspection Expenses (Rent, etc)	254.28	266.56
Rent of Health Dept. Offices	1,365.00	1,400.00
One New Coupe	733.50	----
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	22,292.55	21,365.58
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Baby & Pre-school Clinic Estimates		
Salary of one nurse	1,331.50	1,094.65
Professional Services (Attending Physician)	530.00	525.00
Street Railway Tickets	120.00	120.00
Specialists Services (E.E N & T)(Dentist)	1,535.00	1,583.00
Sundries	28.26	38.51
Rent of Clinic Rooms	390.00	400.00
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	3,934.76	3,761.16
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Total: Health Dept. and Clinic	\$ 26,227.31	\$ 25,126.74
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EXPENDITURE FOR THE PAST FIVE YEARS

Year	1931	1932	1933	1934	1935
Total	30,487.37	29,142.02	26,554.03	25,126.74	26,227.31
Per Capita	36.6¢	34.9¢	31.8¢	30.1¢	31.5¢

EXPENDITURE in 1935 SCHOOL MEDICAL AND DENTAL DEPARTMENT

Expended by School Board. 1st Jan. to 30th April . . .	12,117.18
Expended by Health Dept. 1st May to 31st December. (including purchase of supplies and equipment from School Board and remodelling offices). . . .	21,178.04

	\$ 33,295.22

Per capita expenditure for School Medical and Dental Dept. 39.9¢

